1	Effective December 8, 2004								1/0)[(14.	359	
	CLAIMS AS FILED - PART I						. 044		** * ****	1	77		
	FOTAL OLAMA			(Column 1) (Colur	(Column 2)		SMALL EN			OTI DR <u>SM</u> A	HER THAN	
· -	TOTAL CLAIMS						RATE		FE	Ε .	RATI	E' FE	
- -	FOR			NUMBER FILED	NUMBER E	XTRA	BASIC FEE				BASIC	EE	
-11-	TOTAL CHARGEABLE CLAIMS			minus 2	0=	· ·	X\$ 25=			0	R X\$50	=	
- 11-	INDEPENDENT CLAIMS			minus	3=		X10			0	R X200	-	
	MULTIPLE DEPENDENT CLAIM PRESENT				·		+1	80=		0	R +360=		
	If the difference in column 1 is less than zero, enter "0" in column 2						7	OTAL			R TOT	AL	
	CLAIMS AS FILED - PART II							•			нто	ER THAN	
K	70121	(Column 1)	·	(Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Column 3)		SMA	ALL	ENTITY	OF		L ENTITY	
E N		REMAINING AFTER AMENDMENT			PRESENT EX	TRA	R/	TE.	ADDI TIONA FEE	W.	RATE	ADDI- TIONA FEE	
MENDMEN	Total	1. 3%	Minus	- 35	=	•	X\$	25=		OF	X\$50=	 	
₩ W W		1 (9)	Minus	- B	=		X10	00=	-	OF	}	 	
1	FIRST PRESENTATION OF MULTIPLE DEPENDENT O				NT CLAIM [+18	10=	·	OR	+360=		
	;		•					OTAL I. FEE		OR	TOTA ADDIT. FE		
	··	(Column 1)	<u>:</u>	(Column 2)	· (Column	3)				-		-	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXT	RA .	RA	re :	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
ES ES	Total	•	Minus	44	=		X\$ 2	5=		OR	X\$50=	1	
AM	Independent	FATATION OF	Minus	***	-		X10	D=		OR	X200=	1	
<u> </u>	· INOT FREE	PENIKHON OF	MULTIF	LE DEPENDEN	T CLAIM [+18			OR	+360=		
		(Caluma 1)				· · · ·	TIDDA	FEE.		OR	TOTAL ADDIT. FEE		
		(Column 1) CLAIMS		(Column 2) HIGHEST	(Column :	3)							
AMENDMENT C		REMAINING AFTER AMENDMENT		NUMBER PREVIOUSLY PAID FOR	PRESENT EXT	W.	RAT		ADDI- TONAL FEE		RATE	ADDI- TIONAL FEE	
Q	Total ·	4	Minus .	**	=		X\$ 25	=		OR	X\$50=		
	Independent		Minus		= .	-	X100	=		OR -	X200=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						+180	= -		OR	+360=		
•. If t	If the entry in column 1 is less than the entry in column 2, write "0" in column 3 If the "Highest Number Province in Pole Co. II in The Co. II in The Co. II in Column 3									L OR	TOTAL ADDIT. FEE		
*** f	** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."												
FORM	The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. ORM PTO-875 (Rev. 10/04) Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE												

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